PSYCHOSOMATICS INDEX to Volume 23, 1982

Subject Index

Adverse reactions

Adverse neuropsychiatric reactions to cimetidine. Weddington WW Jr, Muelling AE, Moosa HH. Jan 49.

Aspirin-induced bleeding and anxiety (letter). Szyrynski V. June 651

Atrial arrhythmia in a patient receiving a tricyclic antidepressant (case report). George DT, Taska RJ, Dec 1261.

Catatonic-like syndrome during neuroleptic therapy (case report). Nakra BRS, Hwu HG.

Cimetidine and delirium: Assessment and management. Strauss A, Jan 57.

Dislocated jaw concealed by dystonia (case report). Multani HS, Varma GK. June 671.

Hair loss in a patient receiving lithium (case report). Muniz CE, Salem RB, Director KL March 312.

Organicity and tardive dyskinesia. Wolf ME, Ryan JJ, Mosnaim AD. May 475.

Psychiatric symptoms produced by nonprescription over-the-counter drugs. Gardner ER, Hall RCW, Feb 186.

Rapid-onset reversible renal impairment during lithium treatment (case report). Hausner R.

Respiratory dyskinesia (case report). Jann MW, Bitar AH. July 764.

Screening for glaucoma in patients receiving psychotropics (letter). Hoffman RS, Bresler MJ. Feb 205.

Stress as a precipitant of neuroleptic-induced dystonia. Sovner R, McGorrill S. July 707. Tricyclics, panic disorders, and arrhythmias (letter). Muskin PR. April 407.

Adolescents

Identifying and managing alcohol problems of adolescents. Bean M. April 389.

Psychiatric aspects of adolescent pregnancy.
Peterson C, Sripada B, Barglow P. July 723. Psychotropic drug therapy in children and adolescents. Wiener JM. May 488.

Affective disorders

Is there a hypoxic affective syndrome? (perspective). Katz IR. Aug 846. See also Depression.

A computerized biochemical profile for detection of alcoholism. Beresford T, Low D, Hall

or accinosism, berestord f, Low D, Ha RCW, Adduci R, Goggans F, July 713. Depressive episodes following alcohol intoxication (case report). Garvey MJ, Tollefon GD. May 538.

Identifying and managing alcohol problems of adolescents. Bean M. April 389.

The clinical approach to alexithymia: A review. Neill JR, Sandifer MG. Dec 1223.

Analgesics See Drugs.

Anorexia nervosa See Eating disorders.

Antidepressants See Drugs.

Antipsychotics

See Drugs.

Aspirin-induced bleeding and anxiety (letter). Szyrvnski V. June 651

Beta-blocking drugs and anxiety. Noves R. Feb 155.

Glycosylated hemoglobin levels in anxious and nonanxious diabetic patients. Turkat ID. Oct 1056.

Levels of anxiety and depression in spinal cord-injured patients. Nestoros JN, Demers-Desrosiers LA, Dalicandro LA

Multicenter controlled study of oxazepam in anxious elderly outpatients. Koepke HH, Gold RL, Linden ME, Lion JR, Rickels K June 641

Tricyclics, panic disorders, and arrhythmias (letter). Muskin PR. April 407.

Anxiolytics See Drugs.

Apnea, sleep See Sleep disorders.

Attachment behavior

Attachment behavior and pain complaints (perspective). Kolb LC. April 413.

Behavioral treatment

Behavioral treatment of functional dysphagia in a 12-year-old boy (case report). Carstens C

Conditioned aversion to chemotherapy (letter). Katz ER. June 650.

Vasovagal fainting: Deconditioning an autonomic syndrome. Babcock HH, Powell DH. Sept 969.

Biofeedback

Clinical use of biofeedback in rehabilitation. Basmajian JV. Jan 67.

Biopsychosocial approach

The biopsychosocial approach: Clinical examples from a consultation-liaison sychiatry service-Part I. Edelstein P. Ross WD, Schultz JR. Jan 15.

The biopsychosocial approach: Clinical examples from a consultation-liaison service-Part 2. Ross WD, Schultz JR. Edelstein P. Feb 141.

The biopsychosocial approach: Clinical examples from a consultation-liaison psychiatry service—Part 3. Schultz JR, Edelstein P, Ross WD. March 233.

Book reviews

Ader R: Psychoneuroimmunology. Dec 1264. American Psychiatric Association: Report of the Task Force on Biofeedback of the American Psychiatric Association. Feb 201.

Appleton WS, Davis JM: Practical Clinical Psychopharmacology, ed 2. March 320. Arieti S, Brodie HKH (eds): American Handbook of Psychiatry, ed 2, vol 7. Aug 872. Ban TA: Psychopharmacology of Depres

Guide for Drug Treatment. Oct 1082 Ban TA. Freyhan FA (eds): Drug Treatment of

Sexual Dysfunction. Sept 977.
Beigel HG, Johnson WR: Application of
Hypnosis in Sex Therapy. Oct 1084. Belmaker R, van Praag HM (eds): Mania: An

Evolving Concept. Jan 102. Burns DD: Feeling Good: The New Mood

Therapy. June 676. Campbell RJ: Psychiatric Dictionary, ed 5. March 317

Cohen J, Cullen JW, Martin LR (eds): Psychosocial Aspects of Cancer. Dec 1263. Cousins N (ed): The Physician in Literature. Dec 1263.

Dalessio DJ (ed): Wolff's Headache and Other Head Pains, ed 4. July 778.

Davidson PO, Davidson SM (eds): Behavioral

Medicine: Changing Health Lifestyles. Jan 102.

Dongier M, Wittkower ED (eds): Divergent Views in Psychiatry. June 674.

Duffy JC: Psychiatry-Continuing Education Review, ed 2. Jan 100. Enna SJ, Malick JB, Richelson E: Antidepressants: Neurochemical, Behavioral,

and Clinical Perspectives. May 571. Essman WB, Valzelli L (eds): Current Developments in Psychopharmacology, vol 6. April 441.

Fisher AL: Health and Prevention of Disease in a Free Society. Feb 201. Hall RCW (ed): Psychiatric Presentations of

Medical Illness: Somatopsychic Disorders.

Jefferson JW, Marshall JR: Neuropsychiatric Features of Medical Disorders. Nov 1195. Kaufman DM: Clinical Neurology for Psychiatrists. March 317.

Kimball CP: The Biopsychosocial Approach to the Patient. May 567

Klein DF, Gittelman R, Quitkin F, Rifkin A: Diagnosis and Drug Treatment of Psychiatric Disorders: Adults and Children, ed 2. Aug 873.

Klein DF, Rabkin JC (eds): Anxiety: New Research and Changing Concepts. Nov 1194. Koranyi EK (ed): Physical Illness in the Psychiatric Patient. July 771.

Levy NB (ed): Psychonephrology 1: Psychological Factors in Hemodialysis and Transplantation. June 675.

Lion JR (ed): Personality Disorders: Diagnosis and Management, ed 2. July 775

Lowinson JH, Ruiz P (eds): Substance Abuse Clinical Problems and Perspectives. Sept 976. Maris RW: Pathways to Suicide: A Survey of Self-Destructive Behaviors. Nov 1195.

Mason AS, Granacher RP (eds): Clinical Handbook of Antipsychotic Drug Therapy Jan 103.

Mathew RJ: Treatment of Migraine. Nov 1196. Miller NE, Cohen GD (eds): Clinical Aspects of Alzheimer's Disease and Senile Dementia (Aging, vol 15). April 441.

Munjack DJ, Oziel LJ: Sexual Medicine and Counseling in Office Practice: A Comprehensive Treatment Guide. March 321. Pines AM, Aronson E. Kafry D: Burnout: From

Tedium to Personal Growth. Oct 1083. Powers PS: Obesity: The Regulation of Weight. July 775

Reid WH (ed): The Treatment of Antisocial Syndromes. Oct 1079 Slaby AE, Tancredi LR, Lieb J: Clinical Psychiatric Medicine. Aug 873.

Slipp S (ed): Curative Factors in Dynamic sychotherapy. Oct 1079.

Smith WL, Merskey H, Cross SC (eds): Pain: Meaning and Management. Jan 101. Udolf R: Handbook of Hypnosis for Professionals. May 571.

Wain HJ (ed): Theoretical and Clinical Aspects of Hypnosis. April 442. Walker JI: Clinical Psychiatry in Primary Care.

July 771 Winokur G: Depression: The Facts. Sept 978.

Bulimia See Eating disorders.

Burnout: Fact or fad (editorial). Martin MJ. May 461.

Cancer

Conditioned aversion to chemotherapy (letter). Katz ER, Chang JC. June 650. Psychiatric presentations of cancer. Peterson LG. Perl M. June 601.

(continued)

XANAX° Tablets ©

CONTRAINDICATIONS

Patients with sensitivity to this drug or other benzodiazepines and in acute narrow angle glaucoma.

WARNINGS

Not of value in psychotic patients. Caution patients against hazardous occupations requiring complete mental alertness and about the simultaneous ingestion of alcohol and other CNS depressant drugs.

Benzodiazepines can cause fetal harm in pregnant women. Warn patients of the potential hazard to the fetus. Avoid during the first trimester

PRECAUTIONS

General: If XANAX is combined with other psychotropics or anticonvulsant drugs, consider drug potentiation (see Drug Interaction section). Exercise the usual precautions regarding size of the prescription for depressed or suicidal patients. In elderly and debilitated patients, use the lowest possible dosage (see Dosage and Administration). Observe the usual precautions in treating patients with impaired renal or hepatic function.

Information for Patients: Alert patients about (a) consumption of alcohol and drugs, (b) possible fetal abnormalities, (c) operating machinery or driving (d) not increasing dose of the drug due to risk of dependence. (e) not stopping the drug abruptly. Laboratory Tests: Not ordinarily required in otherwise healthy patients. Drug Interactions: Additive CNS depressant effects with other psychotropics, anticonvulsants, antihistamines, ethanol and other CNS depressants. Pharmacokinetic interactions with benzodiazepines have been reported. Drug/Laboratory Test Interactions: No consistent pattern for a specific drug or specific test. Carcinogenesis, Mutagenesis, Impairment of Fertility: No carcinogenic potential or impairment of fertility in rats. Pregnancy: See Warnings. Nonteratogenic Effects: The child born of a mother on berizodiazepines may be at some risk for withdrawal symptoms and neonatal flaccidity. Labor and Delivery: No established use. Nursing Mothers: Benzodiazepines are excreted in human milk. Women on XANAX should not nurse. Pediatric Use: Safety and effectiveness in children below the age of 18 have not been established.

ADVERSE REACTIONS

Side effects are generally observed at the beginning of therapy and usually disappear with continued medication. In the usual patient the most frequent side effects are likely to be an extension of the pharmacological activity of XANAX.e.g. drowsiness or lightheadedness.

Central Nervous System: Drowsiness, lightheadedness, depression, headache, confusion, insomnia, nervousness, syncope, dizziness, akathisia, and tiredness/sleepiness.

Gastrointestinal: Dry mouth, constipation, diarrhea, nausea/vomiting, and increased salivation.

Cardiovascular: Tachycardia/palpitations, and hypotension.

Sensory: Blurred vision.

Musculoskeletal: Rigidity and tremor.

Cutaneous: Dermatitis/allergy.

Other Side Effects: Nasal congestion, weight gain, and weight loss. In addition, the following adverse events have been reported with the use of anxiolytic benzodiazepines: dystonia, irritability, concentration difficulties, anorexia, loss of coordination, fatigue, sedation, slurred speech, jaundice, musculoskeletal weakness, pruritus, diplopia, dysarthria, changes in libido, menstrual irregularities, incontinence and urinary retention.

Paradoxical reactions such as stimulation, agitation, increased muscle spasticity, sleep disturbances, and hallucinations may occur Should these occur discontinue the drug.

During prolonged treatment, periodic blood counts, urinalysis, and blood chemistry analyses are advisable. Minor EEG changes, of unknown significance, have been observed.

DRUG ABUSE AND DEPENDENCE

Physical and Psychological Dependence: Withdrawal symptoms have occurred following abrupt discontinuance of benzodiazepines. After prolonged therapy, dosage should be tapered. Controlled Substance Class: XANAX is a controlled substance and has been assigned to schedule IV.

CAUTION: FEDERAL LAW PROHIBITS DISPENSING WITHOUT PRESCRIPTION.

*Cohn JB: Multicenter double-blind efficacy and safety study comparing alprazolam. diazepam and placebo in clinically anxious patients. J Clin Psychiatry 42 (9):347–351, 1981.



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INDEX (continued)

Psychiatric consultation with the ambivalent cancer surgery candidate. Bukberg JB, Straker N. Oct 1043.

Reactive paranoid psychosis following an ambiguous cancer diagnosis (case report). Wanck B. April 439.

Cardiovascular disease

Temporal distribution of myocardial infarction pain. Kaufman MW, Gottlieb G, Kahaner K, Peselow ED, Ginsberg GL. Nov 1109.

Case reports

Atrial arrhythmia in a patient receiving a tricyclic antidepressant. George DT, Taska RJ. Dec 1261

Behavioral treatment of functional dysphagia in a 12-year-old boy. Carstens C. Feb 195.

Catatonic-like syndrome during neuroleptic therapy. Nakra BRS, Hwu HG. July 769.

Delirium and depression associated with amphotericin B. Weddington WW Jr. Oct 1076.

Depressive episodes following alcohol intoxication. Garvey MJ, Tollefson GD. May 538.

Dislocated jaw concealed by dystonia. Multani HS, Varma GK, June 671.

Gastric dilatation as a complication of bulimia. Mitchell JE, Pyle RL, Miner RA. Jan 96. Hair loss in a patient receiving lithium. Muniz

CE, Salem RB, Director KL. March 312. Hypochondriasis, masked depression, and electroconvulsive therapy. Miller RD.

Aug 862.

Identifying organic brain disease by amobarbitol sodium interview: Diagnostic pitfalls.

Roy-Byrne P, Edelstein C. Oct 1069. Lecithin and physostigmine for posttraumatic memory and cognitive deficits. Walton RG. April 435.

Misperception of hemodialysis. Rabin PL. May 549.

Noninvasive measurement of cardiac ejection fraction during desipramine treatment. Murburg M, Anton RF, Nelson JC, Jatlow PI. July 759

Overlooking the diagnosis of anorexia nervosa. Gross M. July 752.

Phenothiazine therapy and latent organic brain syndrome. Walker WR. Sept 962.

Pseudodementia masking substance abuse and depression. Good WV, Dubovsky SL. June 652.

Pseudodementia: Use of the DST in diagnosis and treatment monitoring. Rudorfer MV, Clayton PJ. April 429.

Psychogenic abdominal pain and parental pressure in childhood athletics. Adler R, Bongar B, Katz ER. Nov 1185. Psychogenic vomiting associated with

depression. Haggerty JJ, Golden RN. Jan 91. Rapid-onset reversible renal impairment during lithium treatment. Hausner R. May 543.

Reactive paranoid psychosis following an ambiguous cancer diagnosis. Wanck B. April 439.

Respiratory dyskinesia. Jann MW, Bitar AH. July 764.

Root work and the refusal of surgery. Lyles MR, Hillard JR. June 663.

Schizophreniform episode with infectious mononucleosis. Bleich A, Munitz H, Wijsenbeek H. Oct 1067.

Sequelae of nitrous oxide abuse. Greenblum DN, Serby M, Goodgold AL. March 307, Sexual dysfunction in women using major

tranquilizers. Degen K. Sept 959. Spinal-cord vascular malformation with perimenstrual symptoms. Chamberlin BC, Newman DC, Rosenbaum AH. Nov 1189. The amobarbital interview in the differential diagnosis of catatonia. Tollefson GD.

April 437.

The effect of hemodialysis on tardive dyskinesia Callen KE, Malek-Ahmadi P, Davis D, Davis LG, Sorkin MI. Aug 869.

Vasovagal fainting: Deconditioning an autonomic syndrome. Babcock HH, Powell DH, Sept 969.

Catatonia

Catatonic-like syndrome during neuroleptic therapy (case report). Nakra BRS, Hwu HG. July 769.

Disorders associated with catatonia (letter). Johnson GC. Sept 957.

Phenylpropanolamine effects (letter). Marshall TJ. Oct 1055.

The amobarbital interview in the differential diagnosis of catatonia (case report). Tollefson GD. April 437.

The differential diagnosis of catatonic states. Stoudemire A. March 245.

Children

Behavioral treatment of functional dysphagia in a 12-year-old boy (case report). Carstens C. Feb 195.

Management of childhood depression:
Developmental considerations. Bemporad JR.
March 272.

Psychotropic drug therapy in children and adolescents. Wiener JM. May 488.

Cimetidine See Drugs.

Cognition

See Trauma.

See Trauma Compliance

Misperception of hemodialysis (case report). Rabin PL. May 549.

Root work and the refusal of surgery (case report). Lyles MR, Hillard JR. June 663. Thirst and weight gain during maintenance hemodialysis. Wirth JB, Folstein MF. Nov 1125.

Computed tomography See Tomography.

Consultation-liaison psychiatry

Computed tomography of the brain and the psychiatric consultation. Holt RE, Rawat S, Beresford T, Hall RCW. Oct 1007.

Maintaining the parent-staff alliance in an intensive care nursery. Zeanah CH, Jones JD. Dec 1238.

Nurses and psychiatric liaison. Levenson JL, Levy NB. Lipowski ZJ (letter). March 299. Objectives for residents in consultation psychiatry: Recommendations of a task force

Cohen-Cole S, Haggerty JJ, Raft D. July 699. Psychiatric consultation to internal medicine: A psychiatrist's thoughts. Schubert DSP. Aug 833.

Psychiatric consultation to internal medicine: An internist's thoughts. McCue JD. Aug 832.
Psychiatric consultation with the ambivalent

rsycniatric consultation with the ambivalent cancer surgery candidate. Bukberg JB, Straker N. Oct 1043.

Psychiatric interventions in spinal cord injury.
Gallagher RM III, McKegney FP, Gladstone T. Nov 1153.

Psychiatric teaching and consultation in a primary care clinic. Barsky AJ, Brown HN. Sept 908.

Root work and the refusal of surgery (case report). Lyles MR, Hillard JR. June 663.

The biopsychosocial approach: Clinical examples from a consultation-liaison psychiatry service—Part I. Edelstein P, Ross WD, Schultz JR. Jan 15.

The biopsychosocial approach: Clinical examples from a consultation-liaison service—Part 2. Ross WD, Schultz JR, Edelstein P. Feb 141.

The biopsychosocial approach: Clinical examples from a consultation-liaison psychiatry service—Part 3. Schultz JR, Edelstein P, Ross WD. March 233.

The psychiatric team on a spinal cord injury service. Seligson D, Gallagher RM III. Nov 1152

The role of psychoanalysis in consultation-liaison psychiatry. Hawkins DR.

Use of CT scanning in psychiatry. Pearlson GD, Veroff AE, Wise TN. Oct 993.

Conversion disorder

Some thoughts on conversion (perspective). Kimball CP, Blindt K. June 647.

CT scanning

See Tomography.

Death

Grief reactions to perinatal death: An exploratory study. LaRoche C, Lalinec-Michaud M, Engelsmann F, Fuller N, Copp M, Vasilevsky K. May 510.

Delirium

Cimetidine and delirium: Assessment and management. Strauss A. Jan 57.

Delirium and depression associated with amphotericin B (case report). Weddington WW Jr. Oct 1076.

The mortality of delirium: An underappreciated problem? Weddington WW Jr. Dec 1232.

Dementia

Aging, memory loss, and dementia (perspective).

Kosik KH, Growdon JH. July 745.

Pseudodementia mosking substance abuse and

Pseudodementia masking substance abuse and depression (case report). Good WV, Dubovsky SL, June 652.

Pseudodementia: Use of the DST in diagnosis and treatment monitoring (case report). Rudorfer MV, Clayton PJ. April 429.

Depression

Delirium and depression associated with amphotericin B (case report). Weddington WW Jr. Oct 1076.

Depressive episodes following alcohol intoxication (case report). Garvey MJ, Tollefson GD. May 538.

Folic acid deficiency and depression (letter). Botez MI, Botez T, Ananth J. Jan 63. Hypochondriasis, masked depression, and electroconvulsive therapy (case report). Miller RD. Aug 862.

Levels of anxiety and depression in spinal cord-injured patients. Nestoros JN, Demers-Desrosiers LA, Dalicandro LA. Aug 823.

Management of childhood depression:
Developmental considerations. Bemporad JR.
March 272.

Pseudodementia masking substance abuse and depression (case report). Good WV, Dubovsky SL. June 652.

Psychogenic vomiting and depression (letter). McDanal CE, Haggerty JJ. Sept 957.

Psychogenic vomiting associated with depression (case report). Haggerty JJ, Golden RN. Jan 91. Use of psychostimulants in medically ill depressed patients. Kaufmann MW, Murray GB, Cassem NH. Aug 817.

Dermatology

Dermatologic disorders. Engels WD. Dec 1209.

Dexamethasone

See Tests.

Diahetes

Diabetic patients and the impact of renal transplantation. Peterson LG, Perl M. Feb 173.

Glycosylated hemoglobin levels in anxious and nonanxious diabetic patients. Turkat ID. Oct 1056.

Social disability and psychiatric morbidity in sickle cell anemia and diabetic patients. Damlouji NF, Kevess-Cohen R, Charache S, Georgopoulos A, Folstein MF. Sept 925.

Diagnosis

A computerized biochemical profile for detection of alcoholism. Beresford T, Low D, Hall RCW, Adduci R, Goggans F. July 713.

Diagnosis and treatment prescription:
Psychiatry's special value (editoria!). Klein
DF. Aug 791.

Identifying organic brain disease by amobarbital sodium interview: Diagnostic pitfalls (case report). Roy-Byrne P, Edelstein C. Oct 1069.

Pseudodementia: Use of the DST in diagnosis and treatment monitoring (case report). Rudorfer MV, Clayton PJ. April 429.

Psychiatric illness in medical patients: Why it goes undiagnosed. Schwab JJ. March 225. Psychogenic abdominal pain and parental pressure in childhood athletics (case report). Adler R, Bongar B, Katz ER. Nov 1185.

Spinal-cord vascular malformation with perimenstrual symptoms (case report). Chamberlin BC, Newman DC, Rosenbaum AH. Nov 1189.

The amobarbital interview in the differential diagnosis of catatonia (case report). Tollefson GD. April 437.

The mortality of delirium: An underappreciated problem? Weddington WW Jr. Dec 1232.

Dialysis

Continuous ambulatory peritoneal dialysis: Psychological factors. Gonsalves-Ebrahim L, Gulledge AD, Miga S, Sept 944.

Thirst and weight gain during maintenance hemodialysis. Wirth JB, Folstein MF. Nov 1125.

Drug abuse

Pseudodementia masking substance abuse and depression (case report). Good WV, Dubovsky SL. June 652.

Sequelae of nitrous oxide abuse (case report). Greenblum DN, Serby M, Goodgold AL. March 307.

Drugs

Amobarbital sodium: The amobarbital interview in the differential diagnosis of catatonia (case report). Tollefson GD. April 437.

Amobarbital sodium: Identifying organic brain disease by amobarbital sodium interview: Diagnostic pitfalls. Roy-Byrne P, Edelstein C. Oct 1069.

Analgesics on market (letter). Pevnick JS, Flinn DE. Oct 1055.

Antibiotics: Delirium and depression associated with amphotericin B (case report).

Weddington WW Jr. Oct 1076.

Antidepressants: Atrial arrhythmia in a patient receiving a tricyclic antidepressant (case report). George DT, Taska RJ. Dec 1261. Antidepressants: Noninvasive measurement of cardiac ejection fraction during desipramine

(continued)





BRIEF SUMMARY OF PRESCRIBING INFORMATION

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INDICATIONS, Parkinson's Disease/Syndrome and Drug-Induced Extrapyramidal Reactions. SYMMETREL is indicated in the freatment of idiopathic Parkinson's disease (Paralysis Agitans), postencephalitic parkinsonism, drug-induced extrapyramidal reactions, asymptomatic parkinsonism which may follow injury to the nervous system by carbon monoxide intoxication. It is indicated in those elderly pattents believed to develop parkinsonism in association with cerebral artenosclerosis. In the treatment of Parkinson's disease.

SYMMETREL is less effective than levodopa. (-)-3-(3 4-dihydroxyphenyl)-L-alanine, and its STMMELTACL is giss a flective timal revoluple, (1934) 4-onygloxyprenyp-2-aramie, and efficacy in comparison with the anticholinergic antiparkinson drugs has not yet been established. Although a kind in the produced extraordish are been noted with SYMMETREL when used in patients with drug-induced extraorpyramidal reactions, there is a fower inclined to these side effects than that observed with anticholinergic antiparkinson drugs.

CONTRAINDICATIONS, SYMMETREL is contraindicated in patients with known hypersenders.

stituty to the drug. WARNINGS, Patients with a history of epilepsy or other "seizures" should be observed closely for possible increased seizure activity. Patients with a history of congestive heart failure or peripheral edema should be followed closely as there are patients who developed congestive heart failure while receiving

Patients with Parkinson's disease improving on SYMMETREL should resume normal activities gradually and cautiously, consistent with other medical considerations, such as

the presence of osteoporosis or philebothrombosis

Patients receiving SYMMETREL who note central nervous system effects or blurrin
vision should be cautioned against driving or working in situations where alertness is

important.

PRECAUTIONS. SYMMETREL (amantadine hydrochloride) should not be discontinued abrupily since a few patients with Parkinson's disease experienced a parkinsonian crisis, i.e., a sudden marked clinical deterioration, when this medication was suddenly stopped. The dose of anticholinergic drugs or of SYMMETREL should be reduced if atropine-like

effects appear when these drugs are used concurrently. The dose of SYMMETREL may need careful adjustment in patients with renal impairment, conjective heart failure, peripheral edema, or orthostatic hypotension. Since SYMMETREL is not metabolized and is mainly excreted in the unne, it may accumulate when renal function is inadequate.

Care should be exercised when administering SYMMETREL to patients with liver dis-Care should be exercised with a administering 5 times. That, to patients with mixed usi-ease, a history of recurrent eczematoid rash, or to patients with psychosis or severe psy-choneurosis not controlled by chemotherapeutic agents. Careful observation is required when \$YMMETREL is administered concurrently with central nervous system stimulants. No long-term studies in animals have been performed to evaluate the carcinogenic potential of \$YMMETREL. The mutagenic potential of the drug has not yet been determin

in experimental systems. Pregnancy Category C: SYMMETREL (amantadine hydrochloride) has been shown to be embryotoxic and teratogenic in rats at 50 mg/kg/day, about 12 times the recommended human dose, but not at 37 mg/kg/day. Embryotoxic and teratogenic drug effects were not seen in rabbits which received up to 25 times the recommended human dose. There are no

adequate and well-controlled studies in pregnant women.

SYMMETREL should be used during pregnancy only if the potential benefit justifies the potential risk to the embryo or the fetus.

Nursing Mothers: SYMMETREL is excreted in human milk. Caution should be exercised.

Nursing Mounts: 5 YMMic FREL is excreted in finding from Cauliforshould be exercise hen SYMMETREL is administered to a nursing woman. Pediatric Use: The safety and efficacy of SYMMETREL in newborn infants, and infants elow the age of 1 year have not been established.

below the age of 1 year have not been established.

ADVERSE REACTIONS. The most frequently occurring serious adverse reactions are depression, congestive heart failure, orthostatic hypotensive episodes, psychosis, and urinary retention. Rarely convulsions, leukopenia, and neutropenia have been reported. Other adverse reactions of a less serious nature which have been observed are the following the properties of the respective of the respect

olowing: hallucinations, control with a service section of the development of the develop

DOSAGE AND ADMINISTRATION. Adult Dosage for Parkinsonism: The usual dose of

DOSAGE AND ADMINISTRATION. Adult Dosage for Parkinsonism: The usual dose of SYMMETREL (amantadine hydrochloride) is 100 mg toue a day when used alone. SYMMETREL has an onset of action usually within 48 hours. The initial dose of SYMMETREL is 100 mg daily for patients with serious associated medical tilnesses or who are receiving high doses of other antiparkinson drugs. After one to several weeks at 100 mg once daily, the dose may be increased to 100 mg twice daily. If

Occasionally, patients whose responses are not optimal with SYMMETREL at 200 mg daily may benefit from an increase up to 400 mg daily in divided doses. However, such patients should be superivised closely by their physicians.

Patients initially deriving benefit from SYMMETHEL not uncommonly experience a fall-off

Patients initially deriving benefit from SYMME TREL not uncommonly experience a fall-rol of effectiveness after a few months. Benefit may be regained by increasing the dose to 300 mg daily. Alternatively, temporary discontinuation of SYMME TREL for several weeks tollowed by reinitiation of the drug, may result in regaining benefit in some patients. A decision to use other antiparkinson drugs may be necessary.

Dosage for Concomitant Therapy: Some patients who do not respond to anticholinergic antiparkinson drugs may respond to SYMMETREL. When SYMMETREL or anticholinergic antiparkinson drugs are each used with marginal benefit, concomitant use may record use additional benefit.

When SYMMETREL and levodopa are initiated concurrently, the patient can exhibit rapid therapeutic benefits. SYMMETREL should be held constant at 100 mg daily or twice daily while the daily dose of levodopa is gradually increased to optimal benefit.

When SYMMETREL is added to optimal well-tolerated doses of levodopa, additional benefit may result, including smoothing out the fluctuations in improvement which sometimes occur in patients on levodopa alone. Patients who require a reduction in their usua dose of levodopa because of development of side effects may possibly regain lost benefit

with the addition of SYMME IREL.

Dosage for Drug-Induced Extrapyramidal Reactions: Adult. The usual dose of SYMMETREL (amantadine hydrochloride) is 100 mg twice a day. Occasionally, patients whose responses are not optimal with SYMMETREL at 200 mg daily may benefit from an increase up to 300 mg daily in divided doses

Capsules manufactured by R.P. Scherer-North America. St. Petersburg, Florida 33702





INDEX (continued)

treatment (case report). Murburg M, Anton RF, Nelson JC, Jatlow PI, July 759.

Antidepressants: Tricyclics, panic disorders, and arrhythmias (letter). Muskin PR. April 407. Antipsychotics: Catatonic-like syndrome during

neuroleptic therapy (case report). Nakra BRS. Hwu HG. July 769.

Antipsychotics: Loxapine: Fifteen years' clinical experience. DePaulo JR, Ayd FJ. March 261. Antipsychotics: Phenothiazine therapy and

latent organic brain syndrome. Walker WR. Sept 962

Antipsychotics: Sexual dysfunction in women using major tranquilizers. Degen K. Sept 959. Antipsychotics: Stress as a precipitant of neuroleptic-induced dystonia. Sovner R,

McGorrill S. July 707

Anxiolytics: Minor tranquilizers: Prescribing practices of primary physicians. Rittelmeyer LF. Jan 23

Aspirin-induced bleeding and anxiety (letter). Szyrynski V. June 651.

Beta blockers: Beta-blocking drugs and anxiety.

Noves R. Feb 155. Cimetidine: Adverse neuropsychiatric reactions to cimetidine. Weddington WW Jr, Muelling

AE, Moosa HH. Jan 49. Cimetidine: Cimetidine and delirium: Assessment

and management. Strauss A. Jan 57. Conditioned aversion to chemotherapy (letter).

Katz ER, Chang JC. June 650. Lecithin: Lecithin and physostigmine for posttraumatic memory and cognitive deficits (case report). Walton RG. April 435.

Lithium: Cyclic migraine: A disorder responsive to lithium carbonate. Medina JL. June 625.

Lithium: Hair loss in a patient receiving lithium.

Muniz CE, Salem RB, Director KL. March 312

Lithium: Lithium loss in sweat. Aref MA, El-Badramany M, Hannora N, Sharaf Z, El-Awadi A. April 407.

Lithium: Mood, creativity, and psychotherapeutic participation of patients receiving lithium (perspective). Phillips RH. Ian 81

Lithium: Rapid-onset reversible renal impairment during lithium treatment (case report). Hausner R. May 543.

Nonprescription: Psychiatric symptoms produced by over-the-counter drugs. Gardner ER, Hall RCW. Feb 186.

Oxazepam: Multicenter controlled study of oxazepam in anxious elderly outpatients Koepke HH, Gold RL, Linden ME, Lion JR, Rickels K. June 641.

Phenylpropanolamine effects (letter). Marshall TJ, Stoudemire A. Oct 1055.

Psychostimulants: Use of psychostimulants in medically ill depressed patients. Kaufmann MW, Murray GB, Cassem NH. Aug 817.

Psychotropic drug therapy in children and adolescents. Wiener JM. May 488.

Screening for glaucoma in patients receiving psychotropics (letter). Hoffman RS, Bresler MJ, Feb 205.

Tricyclics: Tricyclics, panic disorders, and arrhythmias. Muskin PR. April 407.

Dyskinesia, tardive

The effect of hemodialysis on tardive dyskinesia (case report). Callen KE, Malek-Ahmadi P, Davis D, Davis LG, Sorkin MI. Aug 869. Organicity and tardive dyskinesia. Wolf ME, Ryan JJ, Mosnaim AD. May 475.

See also Adverse reactions

Dysphagia See Eating disorders.

Eating disorders

Behavioral treatment of functional dysphagia in

a 12-year-old boy (case report). Carstens C. Feb 195.

Bulimia: The secretive syndrome. Herzog DB

Gastric dilatation as a complication of bulimia (case report). Mitchell JE, Pyle RL, Miner RA.

Overlooking the diagnosis of anorexia nervosa (case report). Gross M. July 752. The Kleine-Levin syndrome: A review. Orlosky MI June 609

Editorials

Burnout: Fact or fad? Martin MJ. May 461. Conflicting definitions of the term 'psychosomatic.' Henker FO. Jan 8.

Diagnosis and treatment prescription Psychiatry's special value. Klein DF. Aug 791. 1981 Manuscript reviewers: A word of thanks. Dorfman W. Feb 120.

Psychosomatic illness review (editorial). Dorfman W. Sept 893.

Education

House officer stress (letter). Wright G, Small GW. June 650.

Objectives for residents in consultation psychiatry: Recommendations of a task force. Cohen-Cole S, Haggerty J, Raft D. July 699. Psychiatric recruitment (letter). Crowder MK, Nielsen AC III. May 554.

Psychiatric role models for medical students (letter). Leong GB, Nielsen AC III. Feb 206

Psychiatric teaching and consultation in a primary care clinic, Barsky AJ, Brown HN

Psychiatric training and geriatric medicine (perspective). Hoffman RS. May 529.

Electroconvulsive therapy Hypochondriasis, masked depression, and electroconvulsive therapy (case report). Miller RD. Aug 862.

Electroencephalography

The use of electroencephalography in the practice of psychiatry. Itil TM. Aug 799,

Endocrine disorders

Psychiatric manifestations of Hashimoto's thyroiditis. Hall RCW, Popkin MK, DeVaul R, Hall AK, Gardner ER, Beresford T. April 337.

Epilepsy

See Seizure disorders.

Vasovagal fainting: Deconditioning an autonomic syndrome. Babcock HH, Powell DH. Sept 969.

Folic acid deficiency See Nutrition.

Gastrointestinal disorders

Irritable bowel (letter). Feldman JH, Wise T. Oct 1055

Peptic ulcer. Wolf S. Nov 1101.

Psychogenic abdominal pain and parental pressure in childhood athletics (case report) Adler R, Bongar B, Katz ER. Nov 1185.

Some psychosomatic disorders in Japan from a cultural perspective (perspective). Aoki H, Ikemi Y, Ikemi A. Nov 1171.

The efficacy of group therapy for patients with irritable bowel syndrome. Wise TN, Cooper JN, Ahmed S. May 465

See also Eating disorders, Nausea

Geriatrics

Aging, memory loss, and dementia (perspective). Kosik KH, Growdon JH. July 745. Multicenter controlled study of oxazepam in anxious elderly outpatients. Koepke HH, Gold RL, Linden ME, Lion JR, Rickels K. June 641.

Psychiatric training and geriatric medicine (perspective). Hoffman RS. May 529.

Screening for glaucoma in patients receiving psychotropics (letter). Hoffman RS. Bresler MJ. Feb 205.

Grief reactions to perinatal death: An exploratory study, LaRoche C. Lalinec-Michaud M, Engelsmann F, Fuller N, Copp M, Vasilevsky K. May 510.

Group therapy See Psychotherapy.

Headache

Cyclic migraine: A disorder responsive to lithium carbonate. Medina JL. June 625. Migraine. Raskin NH. Sept 897.

Heart disease

Atrial arrhythmia in a patient receiving a tricyclic antidepressant (case report). George DT, Taska RJ. Dec 1261.

Noninvasive measurement of cardiac ejection fraction during desipramine treatment (case report). Murburg M, Anton RF, Nelson JC, Jatlow Pl. July 759.

Tricyclics, panic disorders, and arrhythmias (letter). Muskin PR. April 407.

Hemodialysis

Misperception of hemodialysis (case report). Rabin PL. May 549.

Renal dialysis: Problems and advantages of on-site psychiatric intervention. Bader MJ. April 373

The effect of hemodialysis on tardive dyskinesia (case report). Callen KE, Malek-Ahmadi P, Davis D, Davis LG, Sorkin Ml. Aug 869. See also Dialysis.

Hospital staff

Maintaining the parent-staff alliance in an intensive care nursery. Zeanah CH, Jones JD. Dec 1238.

Hynnosis

Hypnosis in psychiatry and psychosomatic medicine. Sachs BC. May 523. Hypnosis or not? (letter). Virshup M, Nemon

WJ, Carstens C. Sept 958 Psychogenic vomiting and depression (letter). McDanal CE, Haggerty JJ. Sept 957.

Hypochondriasis

Hypochondriasis, masked depression, and electroconvulsive therapy (case report). Miller RD. Aug 862.

See Sleep disorders.

Kleine-Levin syndrome See Eating disorders.

Letters

Analgesics on market. Pevnick JS, Flinn DE. Oct 1055.

Aspirin-induced bleeding and anxiety. Szyrynski V. June 651.

Conditioned aversion to chemotherapy. Katz ER, Chang JC. June 650. Disorders associated with catatonia. Johnson

GC, Stoudemire A. Sept 957 Folic acid deficiency and depression. Botez MI.

Botez T, Ananth J. Jan 63 House officer stress. Wright G, Small GW June 650.

Hypnosis or not? Virshup M, Nemon WJ, Carstens C. Sept 958. Irritable bowel. Feldman JH, Wise T. Oct 1055 Lithium loss in sweat. Aref MA, El-Badramany M, Hannora N, Sharaf Z, El-Awadi A. April 407

Nurses and psychiatric liaison. Levenson JL, Levy NB, Lipowski ZJ. March 295. Phenylpropanolamine effects. Marshall TJ,

Stoudemire A. Oct 1055. Psychiatric recruitment, Crowder MK, Nielsen AC III. May 554.

Psychiatric role models for medical students. Leong GB, Nielsen AC III. Feb 206. Psychogenic vomiting and depression. McDanal

CE, Haggerty JJ. Sept 957. Screening for glaucoma in patients receiving psychotropics. Hoffman RS, Bresler MJ. Feb 205

Tricyclics, panic disorders, and arrhythmias. Muskin PR. April 407.

Liaison psychiatry
See Consultation-liaison psychiatry.

Lithium See Drugs.

Memory See Trauma.

Migraine

See Headache.

Mononucleosis, infectious

Schizophreniform episode with infectious nonucleosis (case report). Bleich A. Munitz H, Wijsenbeek H. Oct 1067.

Myoclonus, nocturnal

See Sleep disorders.

Nausea

Psychogenic vomiting and depression (letter). McDanal CE. Sept 957.

Psychogenic vomiting associated with depression (case report). Haggerty JJ, Golden RN. Jan 91.

Neurology

Levels of anxiety and depression in spinal cord-injured patients. Nestoros JN. Demers-Desrosiers LA, Dalicandro LA Aug 823.

Nursing

Hospital unit stressors that affect nurses Primary task vs social factors. Mohl PC, Denny NR, Mote TA, Coldwater C. April 366. Nurses and psychiatric liaison (letter). Levenson JL, Levy NB, Lipowski ZJ. March 299.

Nutrition

Folic acid deficiency and depression (letter). Botez MI, Botez T, Ananth J. Jan 63.

Obesity. Powers PS. Oct 1023.

Obstetrics/Gynecology

Grief reactions to perinatal death: An exploratory study. LaRoche C, Lalinec-Michaud M, Engelsmann F, Fuller N, Copp M, Vasilevsky K. May 510. Psychiatric aspects of adolescent pregnanc Peterson C, Sripada B, Barglow P. July 723.

Spinal-cord vascular malformation with perimenstrual symptoms. Chamberlin BC, Newman DC, Rosenbaum AH, Nov 1189.

Organic mental disorders

Aging, memory loss, and dementia (perspective). Kosik KH, Growdon JH. July 745 Identifying organic brain disease by amobarbital

sodium interview: Diagnostic pitfalls (case report). Roy-Byrne P, Edelstein C. Oct 1069. Is there a hypoxic affective syndrome?

(perspective). Katz IR. Aug 846. Organicity and tardive dyskinesia. Wolf ME, Ryan JJ, Mosnaim AD. May 475.

syndrome. Walker WR. Sept 962.

Pain

Attachment behavior and pain complaints (perspective). Kolb LC. April 413. Psychogenic abdominal pain and parental

pressure in childhood athletics (case report). Adler R, Bongar B, Katz ER. Nov 1185

Recent clinical approaches to pain treatment. Flinn D, Yung C. Jan 33.

Temporal distribution of myocardial infarction pain. Kaufman MW, Gottlieb G, Kahaner K, Peselow ED, Ginsberg GL. Nov 1109.

Thermographic validation of physical complaints in 'psychogenic pain' patients. Hendler N, Uematesu S, Long D. March 283.

Panic disorder

See Anxiety.

Pediatrics See Children

Perspective

Aging, memory loss, and dementia. Kosik KH. Growdon JH. July 745.

Attachment behavior and pain complaints. Kolb LC. April 413.

Helping patients with sex problems in the 1980s. Renshaw DC. March 291. Is there a hypoxic affective syndrome? Katz IR.

Aug 846. Mood, creativity, and psychotherapeutic participation of patients receiving lithium. Phillips RH. Jan 81.

Psychiatric training and geriatric medicine. Hoffman RS. May 529

Some psychosomatic disorders in Japan from a cultural perspective. Aoki H, Ikemi Y, Ikemi A. Nov 1171

Some thoughts on conversion. Kimball CP, Blindt K, June 647.

Phenothiazines

See Drugs.

Phenylpropanolamine See Drugs.

Pregnancy

See Obstetrics/Gynecology.

Minor tranquilizers: Prescribing practices of primary physicians. Rittelmeyer LF. Jan 23.

Presidential address

Hypnosis in psychiatry and psychosomatic medicine. Sachs BC. May 523.

Primary care

Psychiatric teaching and consultation in a primary care clinic. Barsky AJ, Brown HN. Sept 908

Pseudodementia

Psychiatric practice

Diagnosis and treatment prescription: Psychiatry's special value (editorial). Klein DF. Aug 791.

Psychoanalysis

The role of psychoanalysis in consultation-liaison psychiatry. Hawkins DR. Nov 1113.

Psychosis

Reactive paranoid psychosis following an ambiguous cancer diagnosis (case report). Wanck B. April 439. See also Organic mental disorders.

Psychosomatic illness review

Dermatologic disorders. Engels WD. Dec 1209. Migraine. Raskin NH. Sept 897. Obesity. Powers PS. Oct 1023.

Peptic ulcer. Wolf S. Nov 1101. Psychosomatic illness review (editorial). Dorfman W. Sept 893.

Psychosomatic medicine

Conflicting definitions of the term 'psychosomatic' (editorial). Henker FO. Jan 8. Hypnosis in psychiatry and psychosomatic medicine. Sachs BC. May 523.

Some psychosomatic disorders in Japan from a cultural perspective (perspective). Aoki H, Ikemi Y, Ikemi A. Nov 1171.

Psychotherapy

Mood, creativity, and psychotherapeutic participation of patients receiving lithium (perspective). Phillips RH. Jan 81

Short-term intensive group psychotherapy for patients with 'functional' complaints. Melson SJ, Rynearson EK, Dortzbach J, Clark RD, Snyder AL. July 689.

The efficacy of group therapy for patients with irritable bowel syndrome. Wise TN, Cooper JN, Ahmed S. May 465.

Rating scales

Extent of agreement between patient and physician ratings of emotional distress Winokur A, Guthrie MB, Rickels K, Nael S.

Rehabilitation

Clinical use of biofeedback in rehabilitation. Basmajian JV. Jan 67.

Renal disorders

Diabetic patients and the impact of renal transplantation. Peterson LG, Perl M.

Rapid-onset reversible renal impairment during lithium treatment (case report). Hausner R. May 543

Renal dialysis: Problems and advantages of on-site psychiatric intervention. Bader MJ. April 377.

Screening

Screening for glaucoma in patients receiving psychotropics (letter). Hoffman RS, Bresler MJ

Schizophreniform episode with infectious mononucleosis (case report). Bleich A, Munitz H, Wijsenbeek H. Oct 1067.

Seizure disorders

Alterations of sexual behavior in temporal lobe epilepsy. Ellison JM. May 499.

Alterations of sexual behavior in temporal lobe epilepsy. Ellison JM. May 499.

Helping patients with sex problems in the 1980s (perspective). Renshaw DC. March 291. Nocturnal penile tumescence as a biologic marker in assessing erectile dysfunction.

Karacan I. April 349. Sexual dysfunction in women using major tranquilizers. Degen K. Sept 959.

Sickle cell anemia

Social disability and psychiatric morbidity in sickle cell anemia and diabetic patients. Damlouji NF, Kevess-Cohen R, Charache S, Georgopoulos A, Folstein MF. Sept 925.

Sleep disorders

Biopsychobehavioral correlates of insomnia, part 1: Role of sleep apnea and nocturnal myoclonus. Kales A, Bixler EO, Soldatos CR, Vela-Bueno A, Caldwell AB, Cadieux RJ. June 589

Insomnia: Importance of the differential diagnosis. Kramer PD. Feb 129.

Somatic illness

Psychiatric illness in medical patients: Why it goes undiagnosed. Schwab JJ. March 225. Psychiatric manifestations of Hashimoto's thyroiditis. Hall RC, Popkin MK, DeVaul R. Hall AK, Gardner ER, Beresford T. April 337

Psychiatric presentations of cancer. Peterson LG, Perl M June 601

Spinal cord

Psychiatric interventions in spinal cord injury.
Gallagher RM III, McKegney FP, Gladstone T. Nov 1153.

Spinal-cord vascular malformation with perimenstrual symptoms. Chamberlin BC, Newman DC, Rosenbaum AH. Nov 1189. The psychiatric team on a spinal cord injury

service. Seligson D, Gallagher RM III. Nov 1152

Stress Burnout: Fact or fad? (editorial). Martin MJ. May 461.

Extent of agreement between patient and physician ratings of emotional distress. Winokur A, Guthrie MB, Rickels K, Nael S. Nov 1135

Hospital unit stressors that affect nurses: Primary task vs social factors. Mohl PC, Denny NR, Mote TA, Coldwater C. April 366. House officer stress (letter). Wright G, Small GW. June 650.

Psychogenic abdominal pain and parental pressure in childhood athletics (case report). Adler R, Bongar B, Katz ER. Nov 1185 Stress as a precipitant of neuroleptic-induced

dystonia. Sovner R, McGorrill S. July 707.

Surgery

Psychiatric consultation with the ambivalent cancer surgery candidate. Bukberg JB, Straker N. Oct 1043.

Root work and the refusal of surgery (case report). Lyles MR, Hillard JR. June 663.

Glycosylated hemoglobin levels in anxious and nonanxious diabetic patients. Turkat ID. Oct 1056.

Identifying organic brain disease by amobarbital sodium interview: Diagnostic pitfalls (case report). Roy-Byrne P, Edelstein C. Oct 1069.

Nocturnal penile tumescence as a biologic marker in assessing erectile dysfunction Karacan I. April 349.

Pseudodementia: Use of the DST in diagnosis and treatment monitoring. Rudorfer MV, Clayton PJ. April 429.

Thermography

Thermographic validation of physical complaints in 'psychogenic pain' patients. Hendler N, Uematesu S, Long D. March 283.

Thyroiditis

Psychiatric manifestations of Hashimoto's thyroiditis. Hall RC, Popkin MK, DeVaul R, Hall AK, Gardner ER, Beresford T. April 337

Tomography

Computed tomography of the brain and the psychiatric consultation. Holt RE, Rawat S, Beresford T, Hall RCW. Oct 1007. Use of CT scanning in psychiatry. Pearlson GD, Veroff AE, Wise TN. Oct 993.

Tranquilizers See Drugs.

Transplantation Diabetic patients and the impact of renal transplantation. Peterson LG, Perl M. Feb 173.

Prescribing information

INDICATIONS - For management of anxiety disorders or short-term relief of symptoms of anxiety: for symptomatic relief of acute alcohol withdrawal: for adjunctive therapy in partial seizures

Anxiety or tension associated with stress of everyday life usually does not require treatment with an anxiolytic. Effectiveness in long-term management of anxiety (over 4 months) not assessed by systematic clinical studies. The physician should periodically reassess usefulness for each

CONTRAINDICATIONS - Known hypersensitivity to the drug. Acute narrow angle glaucoma

WARNINGS - Not recommended for use in depressive neuroses or psychotic reactions. Caution patient against hazardous occupations requiring mental alertness, such as operating dangerous machinery including motor vehicles. Advise against simultaneous use of other CNS depressants and caution patients that effects of alcohol may be increased. Not recommended for patients under 9. Nervousness. insomnia, irritability, diarrhea, muscle aches, and memory impairment have followed abrupt withdrawal from long-term high dosage. Withdrawal symptoms were reported after abrupt discontinuance of benzodiazepines taken continuously at therapeutic levels for several months. Use caution in patients having psychological potential for drug dependence (dependence has been observed in dogs and rabbits).

Pregnancy and Lactation: Minor tranquilizers should almost always be avoided first trimester. Consider possibility of pregnancy before initiating therapy. Patient should consult physician about discontinua tion if she becomes pregnant or plans pregnancy. Do not give to nursing mothers

PRECAUTIONS — Observe usual precautions in depression accompanying anxiety, or in patients with suicidal tendency. or those with impaired renal or hepatic function. Do periodic blood counts and liver function tests during prolonged therapy. Use small doses and gradual increments in the elderly or debilitated

ADVERSE REACTIONS - Drowsiness, dizziness, various g.i. complaints, nervousness, blurred vision, dry mouth, headache, mental confusion, insomnia, transient skin rashes, fatigue, ataxia, genitourinary complaints, irritability, diplopia, depression, slurred speech, abnormal liver and kidney function tests, decreased hematocrit, decreased systolic blood pressure.

INTERACTIONS - Potentiation may occur with ethyl alcohol, hypnotics, barbiturates, narcotics, phenothiazines, MAO inhibitors, other antidepressants. In bioavailability studies with normal subjects, concurrent administration of antacids at therapeutic levels did not significantly influence bioavailability of TRANXENE

OVERDOSAGE — Take general measures as for any CNS depressant

SUPPLIED — TRANXENE 3.75, 7.5, and 15 mg capsules and scored tablets. TRANXENE-SD Half Strength 11.25 and TRANXENE-SD 22.5 mg single dose tablets.

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INDEX (continued)

Lecithin and physostigmine for posttraumatic memory and cognitive deficits (case report). Walton RG. April 435.

Peptic ulcer. Wolf S. Nov 1101.

Some psychosomatic disorders in Japan from a cultural perspective (perspective). Aoki H, Ikemi Y. Ikemi A. Nov 1171

Author Index

Adduci R: See Beresford T.

Adler R, Bongar B, Katz ER: Psychogenic abdominal pain and parental pressure in childhood athletics (case report). Nov 1185.

Ahmed S: See Wise TN.

Ananth J: See Botez MI; Bk rev, Mason AS, Granacher RP (eds): Clinical Handbook of Antipsychotic Drug Therapy. Jan 103; Bk rev. Klein DF, Gittelman R, Quitkin F, Rifkin A: Diagnosis and Drug Treatment of Psychiatric Disorders: Adults and Children, ed 2. Aug 873. Anton RF: See Murburg M.

Aoki H, Ikemi Y, Ikemi A: Some psychosomatic disorders in Japan from a cultural perspective (perspective). Nov 1171

Aref MA, El-Badramany M, Hannora N, Sharaf Z, El-Awadi A: Lithium loss in sweat (letter). April 407.

Ayd FJ: See DePaulo JR.

Babcock HH, Powell DH: Vasovagal fainting: Deconditioning an autonomic syndrome (case report). Sept 969.

Bader MJ: Renal dialysis: Problems and advantages of on-site psychiatric intervention.

Barglow P: See Peterson C.

Barnes RH: Bk rev, Smith WL, Merskey H, Gross SC (eds): Pain: Meaning and Management, Jan 101.

Barsky AJ, Brown HN: Psychiatric teaching and consultation in a primary care clinic. Sept 908. Basmajian JV: Clinical use of biofeedback in

rehabilitation Jan 67

Bean M: Identifying and managing alcohol problems. April 389.

Bemporad JR: Management of childhood depression: Developmental considerations. March 272

Beresford T, Low D, Hall RCW, Adduci R, Goggans F: A computerized biochemical profile for detection of alcoholism. July 713. See also Hall RCW.

Beresford T: See Holt RE.

Beresford T: Bk Rev, Jefferson JW, Marshall JR: Neuropsychiatric Features of Medical Disorders, Nov 1195

Bisco MJ: Bk rev, Reid WH (ed): The Treatment of Antisocial Syndromes. Oct 1079.

Bitar AH: See Jann MW.

Bixler EO: See Kales A

Bleich A, Munitz H, Wijsenbeek H: Schizophreniform episode with infectious mononucleosis (case report). Oct 1067. Blindt K: See Kimball CP.

Bongar B: See Adler R.

Botez MI, Botez T, Ananth J: Folic acid deficiency and depression (letter). Jan 63.

Bresler MJ: See Hoffman RS. Brown HN: See Barsky AJ.

Bukberg JB, Straker N: Psychiatric consultation with the ambivalent cancer surgery candidate. Oct 1043.

Cadieux RJ: See Kales A. Caldwell AB: See Kales A.

Callen KE, Malek-Ahmadi P, Davis D, Davis LG, Sorkin MI: The effect of hemodialysis on

tardive dyskinesia (case report). Aug 869, Carstens C: Behavioral treatment of functional dysphagia in a 12-year-old (case report). Feb 195. See also Virshup M.

Cassem NH: See Kaufmann MW.

Chamberlin BC, Newman DC, Rosenbaum AH: Spinal-cord vascular malformation with perimenstrual symptoms (case report). Nov 1189.

Chang JC: See Katz ER. Charache S: See Damlouji NF. Clark RD: See Melson SJ. Clayton PJ: See Rudorfer MV.

Cobbs LW: Bk rev. Lion JR (ed): Personality Disorders: Diagnosis and Management, ed 2.

Cohen-Cole S, Haggerty JJ, Raft D: Objectives for residents in consultation psychiatry: Recommendations of a task force. July 699.

Coldwater C: See Mohl PC. Cooper JN: See Wise TN.

Copp M: See LaRoche C. Crowder MK, Nielsen AC III: Psychiatric recruitment (letter). May 554.

Dalicandro LA: See Nestoros JN Damlouji NF, Kevess-Cohen R, Charache S, Georgopoulos A, Folstein MF: Social disability and psychiatric morbidity in sickle cell anemia and diabetic patients. Sept 925.

Daniels LK: Bk rev, Davidson PO, Davidson SM (eds): Behavioral Medicine: Changing Health Lifestyles, Jan 102

Davis D: See Callen KE. Davis LG: See Callen KE.

Degen K: Sexual dysfunction in women using major tranquilizers (case report). Sept 959.

Demers-Desrosiers LA: See Nestoros JN. Denber HCB: Bk rev, Essman WB, Valzelli L (eds): Current Developments in Psychopharmacology, vol 6. April 441. Denny NR: See Mohl PC.

DePaulo JR, Ayd FJ: Loxapine: Fifteen years' clinical experience. March 261.

DeVaul R: See Hall RCW. Director KL: See Muniz CE.

Dorfman W: 1981 Manuscript reviewers: A word of thanks (editorial). Feb 120. Psychosomatic illness review (editorial). Sept 893. Bk rev, Cousins N (ed): The Physician in Literature. Dec 1263

Dortzbach J: See Melson SJ. Dubovsky SL: See Good WV. Edelstein C: See Roy-Byrne P.

Edelstein P, Ross WD, Schultz JR: The biopsychosocial approach: Clinical examples from a consultation-liaison service-Part Jan 15. See also Ross WD, Schultz JR.

El-Awadi A: See Aref MA. El-Badramany M: See Aref MA.

Ellison JM: Alterations of sexual behavior in temporal lobe epilepsy. May 499.

Engels WD: Dermatologic disorders. Dec 1209. Engelsmann F: See LaRoche C. Feldman JH, Wise T: Irritable bowel (letter).

Oct 1055 Firth ST: Bk rev, Ban TA, Freyhan FA (eds): Drug Treatment of Sexual Dysfunction.

Fisher AL: Bk rev, Kaufman DM: Clinical

Neurology for Psychiatrists. March 317 Fisher JV: Bk rev. Walker JI: Clinical Psychiatry in Primary Care. July 771.

Flinn D, Yung C: Recent clinical approaches to

1280

PSYCHOSOMATICS

pain treatment. Jan 33 Flinn DE: See Pevnick JS.

Folstein MF: See Damlouji NF. Folstein MF: See Wirth JB. Fuller N: See LaRoche C.

Gallagher RM III, McKegney F, Gladstone T: Psychiatric interventions in spinal cord injury. Nov 1153.

Gallagher RM III: See Seligson D.

Gardner ER, Hall RCW: Psychiatric symptoms produced by over-the-counter drugs. Feb 186. See also Hall RCW.

Garvey MJ, Tollefson GD: Depressive episodes following alcohol intoxication (case report). May 538

George DT, Taska RJ: Atrial arrhythmia in a patient receiving a tricyclic antidepressant (case report). Dec 1261.

Georgopoulos A: See Damlouji NF. Ginsberg GL: See Kaufman MW Gladstone T: See Gallagher RM III. Goggans F: See Beresford T. Gold RL: See Koepke HH.

Golden RN: See Haggerty JJ and McDanal CE.
Gonsalves-Ebrahim L, Gulledge AD, Miga S:
Continuous ambulatory peritoneal dialysis: Psychological factors. Sept 944.

Good WV, Dubovsky SL: Pseudodementia masking substance abuse and depression (case report). June 652.

Goodgold AL: See Greenblum DN.

Gottlieb G: See Kaufman MW. Greenberg DB: Bk rev, Slaby AE, Tancredi LR. Lieb J: Clinical Psychiatric Medicine. Aug 873. Greenblum DN, Serby M, Goodgold AL:

Sequelae of nitrous oxide abuse (case report) March 307.

Gross M: Overlooking the diagnosis of anorexia nervosa (case report). July 752 Growdon JH: See Kosik KH.

Gulledge AD: See Gonsalves-Ebrahim L.

Guthrie MB: See Winokur A. Gwartney RH: Bk rev: Report of the Task Force on Biofeedback of the American Psychiatric Association. Feb 201.

Haggerty JJ, Golden RN: Psychogenic vomiting associated with depression (case report). Jan 91. See also Cohen-Cole S and McDanal

Hall AK: See Hall RCW.

Hall RCW: Bk revs, Belmaker R, van Praag HM (eds): Mania: An Evolving Concept. Jan 102; Appleton WS, Davis JM: Practical Clinical Psychopharmacology, ed 2. March 320; Koranyi EK (ed): Physical Illness in the Psychiatric Patient. July 771; Edwinson JH, Ruiz P (eds): Substance Abuse: Clinical Problems and Perspectives. Sept 976.
Hall RCW, Popkin MK, DeVaul R, Hall AK,

Gardner ER, Beresford T: Psychiatric manifestations of Hashimoto's thyroiditis. April 337

See also Beresford T, Gardner ER, Holt RE. Hannora N: See Aref MA.

Harris JJ: Bk revs, Fisher AL: Health and Prevention of Disease in a Free Society. Feb 201; Winokur G: Depression: The Facts.

Hausner R: Rapid-onset reversible renal impairment during lithium treatment (case report). May 543.

Hawkins DR: The role of psychoanalysis in consultation-liaison psychiatry. Nov 1113. Heiman MF: Bk rev. Maris RW: Pathways to

Suicide: A Survey of Self-Destructive Behaviors. Nov 1195.

Hendler N, Uematesu S, Long D: Thermographic validation of physical complaints in 'psychogenic pain' patients.

Henker FO: Conflicting definitions of the term 'psychosomatic' (editorial). Jan 8. Bk revs, Burns DD: Feeling Good: The New Mood Therapy. June 676; Powers PS: Obesity: The Regulation of Weight. July 775; Mathew RJ (d): Treatment of Migraine. Nov 1196.

Herzog DB: Bulimia: The secretive syndrome.

Hillard JR: See Lyles MR.

Hoffman RS: Psychiatric training and geriatric medicine (perspective). May 529. Bk rev. Miller NE, Cohen GD (eds): Clinical Aspects of Alzheimer's Disease and Senile Dementia (Aging, vol 15). April 441. Hoffman RS, Bresler MJ: Screening for

glaucoma in patients receiving psychotropics (letter). Feb 205.

Holt RE, Rawat S, Beresford T, Hall RCW: Computed tomography of the brain and the psychiatric consultation. Oct 1007.

Hwu HG: See Nakra BRS. Ikemi A: See Aoki H. Ikemi Y: See Aoki H.

Itil TM; The use of electroencephalography in the practice of psychiatry. Aug 799.

Jann MW, Bitar AH: Respiratory dyskinesia

(case report). July 764.

Jatlow PI: See Murburg M.

Johnson GC, Stoudemire A: Disorders associated with catatonia (letter). Sept 957.

Jones JD: See Zeanah CH.

Kahaner K: See Kaufman MW. Kales A, Bixler EO, Soldatos CR, Vela-Bueno A, Caldwell AB, Cadieux R.I: Bionsychobehavioral correlates of insomnia. part 1: Role of sleep apnea and nocturnal

myoclonus. June 589. Karacan I: Nocturnal penile tumescence as a

biologic marker in assessing erectile dysfunction. April 349. Karasu TB: Bk rev, Slipp S (ed): Curative

Factors in Dynamic Psychotherapy. Oct 1079. Katz ER, Chang JC: Conditioned aversion to chemotherapy (letter). June 650.

Katz ER: See Adler R.

Katz IR: Is there a hypoxic affective syndrome?

(perspective). Aug 846. Kaufman MW, Gottlieb G, Kahaner K, Peselow ED, Ginsberg GL: Temporal distribution of myocardial infarction pain. Nov 1109.

Kaufmann MW, Murray GB, Cassem NH: Use of psychostimulants in medically ill depressed

patients. Aug 817.

Kevess-Cohen R: See Damlouji NF.

Kimball CP, Blindt K: Some thoughts on conversion (perspective). June 647.

Klein DF: Diagnosis and treatment prescription: Psychiatry's special value (editorial). Aug 791.

Koepke HH, Gold RL, Linden ME, Lion JR, Rickels K: Multicenter controlled study of oxazepam in anxious elderly outpatients. June 641.

Kolb LC: Attachment behavior and pain complaints (perspective). April 413.

Kosik KH, Growdon JH: Aging, memory loss, and dementia (perspective). July 745. Krakowski AJ: Bk rev, Kimball CP: The Biopsychosocial Approach to the Patient.

Kramer PD: Insomnia: Importance of the differential diagnosis. Feb 129.

Lalinec-Michaud M: See LaRoche C. LaRoche C, Lalinec-Michaud M, Engelsmann F, Fuller N, Copp M, Vasilevsky K: Grief reaction to perinatal death: An exploratory study. May 510.

Leong GB, Nielsen AC III: Psychiatric role models for medical students (letter). Feb 206. Levenson JL, Levy NB, Lipowski ZJ: Nurses and

psychiatric liaison (letter). March 295. Levy NB: See Levenson JL. Linden ME: See Koepke HH.

Lion JR: See Koepke HH. Lipowski ZJ: See Levenson JL. Long D: See Hendler N.

Low D: See Beresford T.

Lyles MR, Hillard JR: Root work and the refusal of surgery (case report). June 663. Malek-Ahmadi P: See Callen KE.

Mann H: Bk rev, Wain HJ (ed): Theoretical and Clinical Aspects of Hypnosis. April 442.

Marshall TJ, Stoudemire A: Phenylpropanolamine effects (letter). Oct 1055

Martin MJ: Burnout: Fact or fad? (editorial).

May 461; Bk rev, Hall RCW: Psychiatric Presentations of Medical Illness: Somatopsychic Disorders. May 567.

McCue JD: Psychiatric consultation to internal medicine: An internist's thoughts. Aug 832. McDanal CE, Haggerty JJ, Golden RN:

Psychogenic vomiting and depression (letter). Sept 957

McGorrill S: See Sovner R. McKegney FP: See Gallagher RM III.

Medina JL: Cyclic migraine: A disorder
responsive to lithium carbonate. June 625.

Melson SJ, Rynearson EK, Dortzbach J, Clark RD, Snyder AL: Short-term intensive group psychotherapy for patients with 'functional' complaints. July 689.

Miga S: See Gonsalves-Ebrahim L. Miller RD: Hypochondriasis, masked depression, and electroconvulsive therapy (case report). Aug 862.

Miner RA: See Mitchell JE. Mitchell JE, Pyle RL, Miner RA: Gastric dilatation as a complication of bulimia (case report). Jan 96.

Mohl PC, Denny NR, Mote TA, Coldwater C: Hospital unit stressors that affect nurses Primary task vs social factors. April 366.

Moosa HH: See Weddington WW Jr. Mosnaim AD: See Wolf ME. Mote TA: See Mohl PC.
Muelling AE: See Weddington WW Jr.

Multani HS, Varma GK: Dislocated jaw concealed by dystonia (case report). June 671.

Munitz H: See Bleich A. Muniz CE, Salem RB, Director KL: Hair loss in a patient receiving lithium (case report). March 312.

Murburg M, Anton RF, Nelson JC, Jatlow PI: Noninvasive measurement of cardiac ejection fraction during desigramine treatment (case report). July 759.

Murray GB: See Kaufmann MW. Muskin PR: Tricyclics, panic disorders, and arrhythmias (letter). April 407.

Nael S: See Winokur A. Nakra BRS, Hwu HG: Catatonic-like syndrome during neuroleptic therapy (case report). July 769.

Neill JR, Sandifer MG: The clinical approach to

alexithymia: A review. Dec 1223. Nelson JC: See Murburg M. Nemon WJ: See Virshup M.

Nestoros JN, Demers-Desrosiers LA, Dalicandro LA: Levels of anxiety and depression in spinal cord-injured patients. Aug 823

Neumann CP: Bk rev, Arieti S, Brodie HKH (eds): American Handbook of Psychiatry, ed 2, vol 7. Aug 872. Newman DC: See Chamberlin BC.

Nielsen AC III: See Leong GB and Crowder MK. Noyes R: Beta-blocking drugs and anxiety. Feb 155

Orlosky MJ: The Kleine-Levin syndrome: A review. June 609.

Pearlson GD, Veroff A, Wise T: Use of CT scanning in psychiatry. Oct 993.

Perl M: See Peterson LG. Peselow ED: See Kaufman MW.

Peterson C, Sripada B, Barglow P: Psychiatric aspects of adolescent pregnancy. July 723.

Peterson LG: Bk rev. Cohen J, Cullen JW, Martin LR (eds): Psychosocial Aspects of Cancer. Dec 1263

Peterson LG, Perl M: Diabetic patients and the impact of renal transplantation. Feb 173; Psychiatric presentations of cancer. June 601.

Pevnick JS, Flinn DE: Analgesics on market (letter). Oct 1055.

Phillips RH: Mood, creativity, and psychotherapeutic participation of patients receiving lithium (perspective). Jan 81.

Popkin MK: See Hall RCW. Powell DH: See Babcock HH. Powers PS: Obesity. Oct 1023. Pyle RL: See Mitchell JE.

Rabin PL: Misperception of hemodialysis (case report). May 549.

Raft D: See Cohen-Cole S. Raskin NH: Migraine. Sept 897. Rawat S: See Holt RE.

Rees WL: Bk rev, Dalessio DJ (ed): Wolff's Headache and Other Head Pains, ed 4.

Renshaw DC: Helping patients with sex problems in the 1980s (perspective). March 291

Rickels K: See Koepke HH. Rickels K: See Winokur A.

Rittelmeyer LF: Minor tranquilizers: Prescribing practices of primary physicians. Jan 23. Rosenbaum AH: See Chamberlin BC.

Ross WD, Schultz JR, Edelstein P: The biopsychosocial approach: Clinical examples from a consultation-liaison service-Part : Feb 141. See also Edelstein P, Schultz JR.

Roy-Byrne P, Edelstein C: Identifying organic brain disease by amobarbital sodium interview: Diagnostic pitfalls (case report). Oct 1069

Rudorfer MV, Clayton PJ: Pseudodementia: Use of the DST in diagnosis and treatment monitoring (case report). April 429. Ryan JJ: See Wolf ME.

Rynearson EK: See Melson SJ.

Sachs BC: Hypnosis in psychiatry and sychosomatic medicine. May 523

Salem RB: See Muniz CE. Sandifer MG: See Neill JR.

Schubert DSP: Psychiatric consultation to internal medicine: A psychiatrist's thoughts. Aug 833

Schultz JR, Edelstein P, Ross WD: The biopsychosocial approach: Clinical examples from a consultation-liaison service-Part March 233. See also Edelstein P, Ross WD.

Schwab JJ: Psychiatric illness in medical patients: Why it goes undiagnosed. March 225

Seligson D, Gallagher RM III: The psychiatric team on a spinal cord injury service. Nov 1152

Serafetinides EA: Bk rev. Dongier M, Wittkower ED (eds): Divergent Views in Psychiatry. June 674

Serby M: See Greenblum DN.

Sharaf Z: See Aref MA.

Silverman JJ: Bk rev. Enna SJ. Malick JB. Richelson E: Antidepressants: Neurochemical, Behavioral, and Clinical Perspectives. May 571.

Small GW: See Wright G. Small SM: Bk rev, Duffy JC

Psychiatry-Continuing Education Review, ed 2. Jan 100.

Snyder AL: See Melson SJ. Soldatos CR: See Kales A

Sorkin MI: See Callen KE.

Sovner R, McGorrill S: Stress as a precipitant of neuroleptic-induced dystonia. July 707.

Sripada B: See Peterson C.

Stoudemire A: The differential diagnosis of catatonic states. March 245. See also Johnson GC and Marshall TJ.

Straker N: See Bukberg JB.

Strauss A: Cimetidine and delirium: Assessment and management. Jan 57

Szyrynski V: Aspirin-induced bleeding and anxiety (letter). June 651

Taska RJ: See George DT.

Thompson E: Bk rev, Klein DF, Rabkin JC (eds): Anxiety: New research and changing oncepts. Nov 1194.

Tollefson GD: The amobarbital interview in the differential diagnosis of catatonia (case report). April 437. See also Garvey MJ.

Torem M: Bk revs, Udolf R: Handbook of Hypnosis for Professionals. May 571; Pines AM, Aronson E, Kafry D: Burnout: From Tedium to Personal Growth. Oct 1083.

Turkat ID: Glycosylated hemoglobin levels in anxious and nonanxious diabetic patients. Oct 1056.

Uematesu S: See Hendler N. Varma GK: See Multani HS. Vasilevsky K: See LaRoche C.

Vela-Bueno A: See Kales A. Veroff AE: See Pearlson GD.

Virshup M, Nemon WJ, Carstens C: Hypnosis or not? (letter). Sept 958.

Walker WR: Phenothiazine therapy and latent organic brain syndrome (case report).

Walton RG: Lecithin and physostigmine for posttraumatic memory and cognitive deficits (case report). April 435.

Wanck B: Reactive paranoid psychosis following an ambiguous cancer diagnosis (case report). April 439

Weddington WW Jr: Delirium and depression associated with amphotericin B (case report). Oct 1076; The mortality of delirium: An underappreciated problem? Dec 1232.

Weddington WW Jr, Muelling AE, Moosa HH: Adverse neuropsychiatric reactions to cimetidine. Jan 49.

Wells LA: Bk rev, Campbell RJ: Psychiatric Dictionary, ed 5. March 317.

Wick E: Bk revs, Munjack DJ, Oziel LJ: Sexual Medicine and Counseling in Office Practice: A Comprehensive Treatment Guide, March 321: Beigel HG, Johnson WR: Application of Hypnosis in Sex Therapy. Oct 1084.

Wiener JM: Psychotropic drug therapy in children and adolescents. May 488. Wijsenbeek H: See Bleich A.

Winokur A: Bk rev, Ban T: Psychopharmacology of Depression: A Guide for Drug Treatment. Oct 1082

Winokur A, Guthrie MB, Rickels K, Nael S: Extent of agreement between patient and physician ratings of emotional distress. Nov 1135

Wirth JB, Folstein MF: Thirst and weight gain during maintenance hemodialysis. Nov 1125.

Wise TN: Bk revs, Levy NB (ed):

Psychonephrology 1: Psychological Factors in
Hemodialysis and Transplantation. June 675;
Ader R (ed): Psychoneuroimmunology.

Wise TN, Cooper JN, Ahmed S: The efficacy of group therapy for patients with irritable bowel syndrome. May 465

Wise TN: See Pearlson GD and Feldman JH. Wolf ME, Ryan JJ, Mosnaim AD: Organicity and tardive dyskinesia. May 475.

Wolf S: Peptic ulcer. Nov 1101. Wright G, Small GW: House officer stress (letter). June 650.

Yung C: See Flinn D. Zeanah CH, Jones JD: Maintaining the parent-staff alliance in an intensive care nursery. Dec 1238.

INDEX TO ADVERTISERS

DECEMBER 1982

ABBOTT LABORATORIES Tranxene
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Dalmane
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